| You A A A You Ho | Single and Joint Filers w Sonal information X Mark if your addres X Amended return M.I. Last name AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA | with No Dependents 0 2 0 ss is different than your last return | 4 0 0 5 1 0 0 0 0 | |
|---------------------------------------|---|--|---------------------------------|----|
| You A A Spe A A You Ho | sonal information X Mark if your addres X Amended return first name M.I. Last name | ss is different than your last return | 4 0 0 5 1 0 0 0 0 | |
| You A A Spe A A You Ho | X Amended return first name M.I. Last name | | 4 0 0 3 1 0 0 0 | |
| You A A Spe A A You Ho | X Amended return first name M.I. Last name | | | |
| You A A Spe A A You Ho | X Amended return first name M.I. Last name | | | |
| Spi A / You Ho | first name M.I. Last name | | OFFICIAL USE ONLY | |
| Spi A / You Ho | | X Single X Married filing jointly | у | _ |
| Spi A / You Tho | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | A A A | | |
| You Tho | se's first name M.I. Last name | | | |
| You 9 4 | se's first name AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA | AAA | | |
| 9 6 | social security number Spouse's social security number | Your daytime phone number | | |
| | 9-99-9999 999-99-9999 | 999-999-9999 | | |
| 9 | e address (number and street). If foreign address use Schedule S. | Apartment number | | |
| 1. | | T9AAA AAA | | |
| A | A A A A A A A A A A A A A A A A A A A | | | |
| Cit | State AAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAAA | Zip | | |
| Α, | AAAAAAAAAAAAA | | | |
| D | Income tax Amounts are rounded to the nearest dolla | r. If amount is zero, make no entry | | |
| 1 | Total wages, salaries, tips, unemployment compens | | 1 99999.0 | п |
| | Total wages, salaries, tips, unemployment compens | Sation, Etc. | , , , , , , , , , , , , , , , , | _ |
| 2 | Taxable interest and ordinary dividends If more than | \$1500, you must file Form D-40. | 2 99999.0 | 0 |
| Ш | | | | |
| 3 | DC adjusted gross income Total of lines 1 and 2. If \$ | 100,000 or more, you must file Form D-40 | 3 99999.0 | |
| | | | | _ |
| 4 | Deduction plus exemption amount If single, enter \$3,370 | I I I I I I I I I I I I I I I I I I I | 4 99999.0 | Ц |
| - | If you can be claimed as a dependent on another's tax return, en | | 5 99999.0 | п |
| 5 | DC taxable income Line 3 minus line 4. If line 4 is equ | ial to or more than line 3, make no entry. | 5 11111.0 | U |
| 6 | Tax | | 6 99999.0 | п |
| Ŭ | | | | _ |
| 7 | DC Low Income Credit You cannot claim both this cre | edit and DC Earned Income Tax Credit. | 7 99999.0 | 0 |
| Н | Attach a copy of your federal return. | | | |
| 8 | Net tax Line 6 minus line 7. If line 7 is equal to or more than li | ne 6, this line is left blank. | 8 99999.0 | |
| 9 | V-1k | Description and Object A Dist. | 9 99999.0 | п |
| 9 | Voluntary contribution to the Public Trust for Drug | Prevention and Unildren at Risk | 9 1111111 | |
| 10 | Tax and contribution Total of lines 8 and 9. | | 10 99999.0 | 0 |
| | | | | |
| 1 | Total DC income tax withheld From Forms W-2 and 10 | 099. | 11 99999.0 | |
| \mathbb{H} | | | | |
| 1: | | er your fed. EIC $9999 \cdot 00$ $\times .25 =$ | 12 9999.0 | |
| | Attach a copy of your federal return. | | 13 99999.0 | п |
| 13 | Total payments and credits Total of lines 11 and 12. | | 13 99999.0 | U |
| lf | ne 13 is more than line 10. | If line 13 is less than line 10. | | |
| 14 | Your refund 14 99999-00 | 15 Amount you owe | 15 99999.00 | |
| П | Line 13 minus line 10. | Line 10 minus line 13. | | |
| \sqcup | | | | 4 |
| Si | nature Under penalties of law, I declare that I have examined | d this return and to the best of my knowledge it is corn | rect. | |
| Н | Declaration of paid preparer other than taxpayer is ba | ased on all information available to the preparer. | | - |
| T O | signature Date | Paid preparer's signature | Date | + |
| Sp | ise's signature Date | Paid preparer's FEIN, S\$N, or PTIN | Paid preparer's phone number | |
| П | | 9999999 | 999-999-9999 | |
| | | | | |
| П | | | | |
| Ш | | | | |
| 4 | Revised 10/02 X No | o longer send DC tax forms by mail. | 2002 D-40EZ | μ. |